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Approved for use through 07/31/2006. OMB 0651-0031

0,			Applic	ation Number	09/766,922					
TRANSMITTAL MAY 18 2005 FORM (to be used for ear correspondence after initial filing)			Filing	Date	January 22, 2001 Robert M. Hussey					
			First N	amed Inventor						
			Group	Art Unit	2626					
			Examir	ner Name	Jerome Grant II					
Total Number of Pages in This Submission 34			Attorne	y Docket Number	283-280					
		ENCLO	SURES	(check all that apply)						
Fee Transmittal Fo	m	☐ Drawin	g(s)		After Allowance Communication to Group					
		Licensi	ng-related	d Papers	Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply	y	Petition	ı		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final			to Conve onal Appl		Proprietary Information					
Affidavits/decla			ey, Revocation espondence Address	Status Letter						
Extension of Time	Termin	al Disclai	mer	Other Enclosure(s) (please identify below):						
Express Abandonn	Request for Refund CD, Number of CD(s)			One check for \$970 (RCE and IDS Fees), PTO/SB/30 Request for Continued Examination Transmittal, PTO/SB/08A Information Disclosure Statement by Applicant (1 pg.) and Return Mail Room Postcard.						
Certified Copy of Priority Document(s)			rks	The Commissioner is to Deposit Account I		to charge any additional fees				
Response to Missin Incomplete Application Response to Missing Resp	Express Mail Label No. EV561775462US									
	SIGNAT	URE OF	APPLIC	ANT, ATTORNEY, O	R AGENT					
Firm	Wall Marjama & Bili									
and Individual name	George S. Blasiak	~~	· ·	Reg. No	o. 37,283					
Signature	surp.	2, R	<u>bur</u>		- ''					
Date	May 18, 2005									
				TE OF MAILING						
I hereby certify that thi express mail (Express P.O. Box 1450, Alexar	Mail Label No. EV56	61775462U	S) in an e	n the United States Post envelope addressed to:	al Service wit Mail Stop RC	th sufficient postage as F, Commissioner for Patents, May 18, 2005				
Typed or printed name	Barbara A. Sa	ltsman	^							
Signature	12 1) X		Date	May 18, 2005				

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Effective on 12/08/2004.				Complete if Known								
Page Murraget to the Consolidated Appropriations Act. 2005 (H.R. 4818)				Application Number 09/766,922								
N 18 2005FEE TRANSMITTAL				Filing Date			January 22, 2001					
A For EV 2005					First Named Inventor			Robert M. Hussey				
For FY 2005					aminer Name		Jerome Grant II					
Applicant claims small entity status. See 37 CFR 1.27				Art Unit			2626					
AMOUNT OF PAYMENT \$970.00 Attorney Docket No. 283-280												
Express Mail Label EV561	775462US											
METHOD OF PAYMEN	Γ (check all that											
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FEE CALCULATION												
1. BASIC FILING, SEAR			N FEES			1		N. BBBB				
	FILIN	G FEES		EAR	CH FEES	EXAM		N FEES				
		Small Entit		(0)	Small Entity	F (6)		all Entity		E.a.	Paid (\$)	
Application Type	Fee (\$)	Fee (\$)	Fee (Fee (\$)	Fee (\$) 200	<u> </u>	ee (\$) 100		rees	Faid (\$)	
Utility	300	150	500		250		↓					
Design	200	100	100	0	50	130		65				
Plant	200	100	300	0	150	160		80				
Reissue	300	150	500	0	250	600		300				
Provisional	200	100	0		0	0		0				
2. EXCESS CLAIM FEE	S				•						Small Entity	
Fee Description							· · ·		Fee (<u>\$)</u>	Fee (\$)	
Each claim over 20 or, for	Reissues, each o	laim over 20	and more	than	in the original	patent			50		25	
Each independent claim ov	er 3 or, for Reis	sues, each in	dependent	clai	m more than in	the origina	l patent		200		100	
Multiple dependent claims	·		•						360		180	
Total Claims Extra Claims			<u>1S</u>	-	Fee (\$)		Fee Paid (\$)			e De	pendent	
									Claims		Fee Paid (\$)	
	- 20 or HP =		x		-				Fee (\$)		ree Paid (3)	
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Indep. Claims	otal claims paid to	Extra Claim			Fee (\$)	· · · · · · · · · · · · · · · · · · ·	Fee Pa	aid (\$)	<u> </u>			
тиср. Стапиз	- 3 or HP =	Zatia Ciam	x		 	=	1					
HP =highest number of indep		d for, if greater					\mathbb{L}_{-}					
3. APPLICATION SIZE	FEE											
If the specification and drawing fraction thereof. See 35 U.S.C.	igs exceed 100 sh	eets of paper,	the applicat	tion s	size fee due is \$2	50 (\$125 for	small en	tity) for ea	ch additio	onal	50 sheets or	
Total Sheets	Extra Sheets		Number o	of eac	h additional 50	or fraction	thereof	Fee (\$)			Fee Paid (\$)	
- 100 =		/ 50 =	(roı	und u	p to a whole nun	nber)	х			=		
4. OTHER FEES							Fees Paid (\$)					
Non-English Specification, \$130 fee (no small entity discount)												
Other: Request for Continu	ed Examination	and Informa	tion Discl	losur	e Statement Fe	es					\$970.00	
SUBMITTED BY												
Signature Registration No. 37,283 Telephone (Attorney/Agent)							ne :	315-425-9000				
Nama (Brint/Time)	eorge S. Blaciak					·	ر- · · ر		Date M	lav 1	8, 2005	

Name (Print/Type) George S. Blasiak Date May 18, 2005

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